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**U.S. Department of Justice
United States Marshals Service**

PROCESS RECEIPT

RETURN

*See Instructions for "Service of Process by the US. Marshal"
on the reverse of this form.*

PLAINTIFF

Federal Insurance Co., et a

DEFENDANT

AlQaida, et al

COURT CASE NUMBER

03-CV-6978 (SDNY)

TYPE OF PROCESS

Personal

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

I"lamdouh Mahraua Salim 1K-2- Li) 54
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) To Bureau of P ft

(YTDc

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AT 7A-n

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

<u>I</u>	J. Scott Tarbutton, Esq. Cozen O'Connor 1900 Market Street Philadelphia, PA 19103	Number of process to be served with this Form - 285 1
<u>I</u>		Number of parties to be served in this case 525
<u>I</u>		Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service)

Fold

DISTRICT OF
COPy
Fold

Sign . 0. of 40 ator requesting service on behalf of: 4d1 UTI P \ TELEPHONE NUMBER 215-665-7255 FAXTE 6-2-04

SPAC BE 1 FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total Total Process District District Signature of Authorized USMS Deputy, or Clerk Date number of process indicated. of Origin to Serve _____
(Sign only first USM 285 if more than one USM 285 is submitted) P P 51 51 6/7/04

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (*See remarks below*)

Name and title of individual served (*if not shown above*)

A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (*complete only if different than shown above*)

Date of Service	Time	am
10-29-04	15:00	pm
Signature of U.S. Marshal or Deputy		

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
<u>90.00</u>	<u>25.55</u>	<u>8.00</u>	<u>123.55</u>			

REMARKS:

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